Civil Action No. BAH-25-337

### PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

eceived by me on (de	ate)	02/07/2025	. Depart	ment of Health and Hum	nan Services				
☐ I personally se	erved the su	mmons on the indiv	vidual at (place,						
			on (date)		; or				
☐ I left the sumr	nons at the	individual's residen	ce or usual pla	ace of abode with (name)	1				
		, 2	person of sui	table age and discretion wh	no resides there,				
on (date)	on (date) , and mailed a copy to the individual's last known address; or								
☐ I served the su	immons on	(name of individual)			,	who is			
designated by la	w to accept	service of process of	on behalf of (n	ame of organization)					
			(	on (date)	; or				
☐ I returned the	summons u	nexecuted because				; or			
Other (specify):		I.S. Mail, Postage P on 2/12/2025	repaid, Returr	n Receipt Requested					
My fees are \$	0.00	for travel and \$	0.00	for services, for a total	of\$0.00				
I declare under p	enalty of pe	rjury that this infor	mation is true.						
03/05/2025			3	1 /2					
		l yd		Server's signature					
				Kenyon North, Jr. Parale	gal				
				Printed name and title					
			10	Jenner & Block LLP 099 New York Ave., NW, S Washington, D.C. 2000					
				Server's address					

Additional information regarding attempted service, etc:

8.5	U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only Case 8:25-cV-00337-BAH	Document 123-2	Filed 03/10/25	Page 2 of 3
7018 1830 0002 1706 63	For delivery information, visit our website at www.usps.com*  Cartified Mail Fee  Cartified Mail Fee  Estra Services & Figis Phese box, and fee as appropriately Return Recold Indication by Return Re			

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